Docket No.:



## DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION Tholish Language Declaration Tholy Tholy

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint

	r (ii piurai names ention entitled:	s are listed below) of the subje	ct matter which is claimed and for	which a patent is sought on		
Title:	METHOD AND DEVICE FOR DATA TRANSMISSION					
the spe	ecification of wh	nich				
(check	one)					
	is attached her	is attached hereto.				
$\boxtimes$	was filed on	5 December 2001	as United States Applic	cation No.10/004,685		
or PCT						
	International Application Number filed on					
	and was amen	ded on (if applicable)				
		reviewed and understand the c ny amendment referred to abov	contents of the above-identified spe ve.	ecification, including the		
			Patent and Trademark Office all in of Federal Regulations, Section 1.			
any fore which d checkin	eign application(s designated at leasing the box, any fo	s) for patent or inventor's certi st one country other than the I	f, United States Code, Section 119 ficate, or Section 365(a) of any Pounited States, listed below and ha inventor's certificate or PCT Intertity is claimed.	CT International Application are also identified below, by		
Prior I	Foreign Applic	ation(s)				
(	(Number)	(Country)	(Day/Month/Year Filed)	Priority Not Claimed		
200027	02	Finland	8 December 2000			
			<u> </u>	Page 1 of 4		

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I hereby claim the benefit under 35 U.S.C. Section 119(e) of any United States provisional application(s) listed below:					
(Application Serial No.)		(Filing Date)			
(Application Serial No.)		(Filing Date)			
(Application Serial No.:		(Filing Date)			
I hereby claim the benefit under 35 U.S.C. Section 120 of any United States application(s), or Section 365(c) of any PCT International Application designating the United States, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International Application in the manner provided by the first paragraph of 35 U.S.C. Section 112, I acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me to be material to patentability as defined in Title 37, C.F.R., Section 1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application:					
(Application Serial No.)	(Filing Date)	(Status)			
	-	(patented, pending, abandoned)			
(Application Serial No.)	(Filing Date)	(Status) (patented, pending, abandoned)			
(Application Serial No.)	(Filing Date)	(Status) (patented, pending, abandoned)			
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					

POWER OF ATTORNEY: As a named inventor, I here and/or agent(s) to prosecute this application and transact al Office connected therewith. (list name and registration number 1)	I business in the Patent and Trademark
All attorneys listed under Customer No.: 2512	
Send Correspondence to:	
Customer No.: 2512	
Direct Telephone Calls to: (name and telephone number) Clarence A. Green, Reg. No.: 24,622 (203) 259-1800	
Full name of sole or first inventor:  Janne HAAVISTO	
Sole or first inventor's signature:	2002/2/12
Residence: Kevätniitynkuja 10 A 2, FIN-36110 Ruutana, Finland Citizenship: Finnish	· · · · · · · · · · · · · · · · · · ·
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Full name of second inventor:	
Second inventor's signature:	DATE
Residence address:	
Citizenship:	
Post Office Address:	
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Full name of third inventor:		
Third Inventor's signature:	DATE	
Residence address:		
Citizenship:		
Post Office Address:		
Full name of fourth inventor:		
Fourth inventor's signature:	DATE	
Residence address:		
Citizenship:		
Post Office Address:	. :	
Full name of fifth inventor:		
Fifth inventor's signature:	DATE	
Residence address:		
Citizenship:		
Post Office Address:		
Check here if additional pages are attached	d. Number of added pages:	Page 4 Of 4